

REPORTS INVENTORY				CONTROL NO.	
PREPARE IN DUPLICATE				DDS/OL/LSD 2	
1. TITLE OF REPORT (if a fill-in report include Form No.) LSD Statistical Report				2. TYPE OF REPORT	<input checked="" type="checkbox"/> STATISTICAL <input type="checkbox"/> NARRATIVE <input type="checkbox"/> MACHINE-NAME LISTING
3. FUNCTIONAL AREA	<input type="checkbox"/>	PERSONNEL	<input type="checkbox"/>	TRAINING	ADMIN. GENERAL OTHER (specify)
	<input checked="" type="checkbox"/>	LOGISTICS	<input type="checkbox"/>	SECURITY	
	<input type="checkbox"/>	MEDICAL	<input type="checkbox"/>	FINANCE	
4. NO. OF COPIES PREPARED 3	5. FREQUENCY (weekly, monthly, quarterly, etc.) Monthly, plus Cumulative Report Semi-annually to EO/OL			6. DISTRIBUTION (No. of components not number of copies) Monthly-LSD and Branches, plus Semi-Annually to EO/OL	
7. FORMAT (memorandum, form computer print-out, etc) LSD Format	8. ADP PROCESSING <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES GIVE ADP PROCESSING NO.			9. DIRECTIVE AUTHORITY REQUIRING REPORT LSDI 7-2	
10. PREPARING COMPONENT (include lowest level contributing information to report) LSD Branches (6)			11. FEEDER REPORTS (State total number and identify by Title, Form No., or nomenclature. Attach separate sheet if necessary.) Branch Work Sheets		
12. COST FACTORS					
A. MANUAL PREPARATION AND REVIEW COSTS					
GRADE	HOURLY RATE	<input checked="" type="checkbox"/> HOURS PER REPORT	=	COST PER REPORT	<input checked="" type="checkbox"/> TIMES PREPARED = COST PER YEAR
(SEE ATTACHED SHEET)					
B. COSTS OF COMPUTER PRODUCED REPORTS					
988 TOTAL COSTS PER YEAR					\$1204.45
13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN, INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT. Development of sagacious and prudent reporting designed to support and further expand sound management of Division and overall Logistics affairs.					
14. FUTURE GOALS					
GOAL PROPOSED BY COMPONENT FOR THIS REPORT <input checked="" type="checkbox"/> RETAIN AS IS <input type="checkbox"/> OTHER (explain) <input type="checkbox"/> CHANGE <input type="checkbox"/> DISCONTINUE Eliminates the quarterly preparation of this report				ESTIMATED SAVINGS MAN-HOURS 57 DOLLARS \$301.11 \$3612.00	
16. DATE OF INVENTORY 9 October 1970		17. NAME AND TITLE OF PERSON FURNISHING INFORMATION Reports Officer, LSD/OL			18. EXTENSION